

POSITION	ID NO.	DATE
CLASSIFIER	12	5/6/93
EXAMINER	434	5/11/93
TYPIST	385	5/18/93
VERIFIER	186	5/24/93
CORPS CORR.		434
SPEC. HAND		5/20
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	5/24/93
2	5/24/93
3	5/24/93
4	5/24/93
5	5/24/93
6	5/24/93
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SYMBOLS

- ✓ Rejected
- = Allowed
- (Through number) Cancelled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
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